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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a yalld OMB control number. PATENT APPLICATION FEE DETERMINATION RESERD Substitute for Form PTO-876 APPLICATION AS FILED - PART I OTHER THAN SMALL ENTITY (Column 1) SMALL ENTITY (Column 2) OR FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) BASIQ FEE (87 OFR 1,15(8), (b); or (c)) RATE (\$) FEE (\$) . N/A NA . NA NA . SEARCH FEÈ (87 OFR 1.16(K), (I), or (m)) N/A N/A N/A N/A EXAMINATION FEE (37 OFR 1.16(0), (p), or (q)) N/A ŃΑ NA TOTAL CLAIMS 67 CFR 1.16(1)) 2B = mlnus 20 = 50 OR INDEPENDENT CLAIMS (37 OFR 1.16(h)) x 105 = minus 9 = 210 If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). (37 CFR 1,16(s)) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(1)) 185 370 If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II OTHER THAN SMALL ENTITY (Column 1) (Column 2) (Column 3) SMALL ENTITY CLAIMS HIGHEST NUMBER PREVIOUSLY REMAINING PRESENT RATE (\$) RATE (\$) AFTER AMENDMENT ADDI-TIONAL FEE (\$) AMENDMENT TIONAL FEE (\$) Total Minus × 25 x.50 OR Independent Of DER 1.16(h)) Minus x 105 = 210 OR Application Size Fee (3) CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 185 (37 CFR 1.16(J)) 370 OR TOTAL ADD'L FEE TOTAL ADD'L FEE OR

	<del></del>	(Column 1)	. · ·	(Column 2)	_ (Column 3)		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT:		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total (37 CFR 1.16(1))		Minus	**	=		
	Independent (37 OFF 1.16(h)).	•	Minus	414	*		
	Application Size Fee (37 CFR 1.16(s))						
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(I))						
	A WOLL LICOTELL	VION OF WACIIPE	= DELEUD	ENT CLAIM (37 CF	R 1.16(j)		

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RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
x 25 =		OR	× 50 =	
× 105 =		OR	× 210 =	
185			370	
		OR	N/A	
ADD'L FEE		.OR	TOTAL ADD'L FEE	

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3".

The Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3".

The Highest Number Previously Paid For" (N THIS SPACE is less than 3, enter "3".

The Space is less than 3, enter "3".

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